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SUBJECT: PRESIDENT CARTER NOTES PROGRESS AND EMPHASIZES  
NEED FOR VIGILANCE IN GUINEA WORM ERADICATION

¶1. Summary: Former United States President Jimmy Carter visited Ghana March 31-April 1, 2008 to review the successes of the Guinea worm eradication program as well as to begin discussions on the potential role of the Carter Center as election monitors for the upcoming Presidential election in Ghana. President Carter was accompanied by his wife Roslyn Carter, Cousin Don Carter, and Carter Center senior staff Don Hopkins and John Hardman. Over the past year, collaborative efforts between the Carter Center, UNICEF, the National Guinea Worm Eradication Program (GWEP), USAID, WHO and other donors and partners reduced the number of new Guinea worm cases in Ghana by 91 percent over the past year. End Summary

¶2. During the two-day visit, President Carter and his delegation met with a variety of partners, Ghanaian and U.S. government officials, NGOs as well as Carter Center staff and their implementing partners. President Carter began his visit by meeting President of Ghana, John Agyekum Kufuor and complimented his country's efforts against Guinea worm by noting that the 91 percent drop of new cases in Ghana was the largest reduction seen in the world. President Carter underscored the need for surveillance and early case detection to ensure that no new cases are missed. He also called for a scale-up of safe water systems by August.. President Carter outlined 2009 as the target year for complete Guinea worm eradication in Ghana.

¶3. President Kufuor highlighted 45 million euros of recent support from development partners for improvements in water systems and noted the assistance empowered districts to improve their own water supply. President Carter closed his comments by offering Carter Center election monitoring to support Ghana's December elections but reached no concrete agreement with President Kufuor on his proposal.

President Kufuor tasked his Minister of Health to further discuss with President Carter challenges and opportunities regarding access to primary health care as well as a potential training program for community-based health extension workers.

¶4. President Carter held follow-up discussions with the Minister of Health along with senior staff of the National Guinea Worm Eradication Program to discuss the details of Ghana's efforts. The Minister emphasized his commitment to "waging war on Guinea worm." The Minister also highlighted some best practices of the Guinea Worm Eradication Program including meetings with chiefs, local leaders and other cross-sections of the population. The Minister noted that the eradication program enlisted support from development partners and civil society but needed to involve local government and water/sanitation officials outside the health sector to ensure broader coverage. President Carter reiterated the importance of vigilance to ensure that all

at-risk communities have access to an adequate supply of safe drinking water.

¶5. Discussions also centered on the prevalence of malaria within Ghana as a public health problem. The Ghana Health Service Deputy Director related that the entire population of Ghana was at risk to contract this disease. While support for bed nets is growing, the Deputy Director called for more support in the areas of treatment, diagnostics, education, and implementation. The Minister also stated that a recent economic modeling exercise showed that Ghana loses approximately \$762 million in labor productivity each year to malaria. The Ghana Health Services also reported that

4 million bed nets had been distributed to Ghana's population of 22 million but that another 4 million were necessary to provide two bed nets per household. They called for additional focus on indoor residual spraying and possibly insect sterilization as well as improvement of procurement and distribution channels. President Carter raised concern over the high cost of latrines in the country and asked if the Ministry of Health could work with the water program to help reduce these costs.

¶6. Following President Kufuor's advice, the Minister and President Carter discussed the idea of community health extension workers similar to community health nurses. This program would aim to fit into the currently existing Community-based Health Planning Services (CHPS) program with the overall goal of one nurse per 500 persons. The Minister stated that there are currently at least 22,000 nurses in the country who are working towards this goal. (Comment: USAID disputes this number as well as some

ACCRA 00000505 002 OF 002

of the claims made around health extension workers, and has promised President Carter to follow-up with additional information on this topic. End Comment.)

¶7. During the discussions, it was noted that the Ghanaian Parliament has proposed free medical care for Guinea worm patients, provisions to support mobile clinics, and legislation to control contamination by infected individuals. The Ministry of Health has also committed to double the budget for Guinea worm to one million Ghana Cedis (approximately one million USD) from its previous 2007 total of 500,000. Ghana currently reports only 195 Guinea worm cases with 94% of all cases in the Northern Region.. During the last transmission cycle, 60% of cases were distributed among a population of 35,000 people (approximately 4-5 townships). UNICEF also notes that 60% of cases occur in children under age 5.

¶8. President Carter met with all other relevant development partners working on Guinea worm eradication. There are currently 180 villages with Guinea worm and President Carter discussed the need to be careful about over-confidence. He also stated that countries that have eradicated Guinea worm do not want to see a return of cases. Ghana has had some set backs when poorly managed water provision, caused a breakdown in the system. He encouraged everyone to learn lessons from these experiences.

¶9. Partners agreed that areas of achievement included improvement in surveillance and containment as well as better supervision and expanded water control. There was also consensus on many of the remaining challenges including maintaining a "security program" to guard dams against access by infected individuals (until they are treated), monitoring program discipline, ensuring there is an adequate water supply, implementing surveillance for non-endemic areas (to ensure no new cases are introduced), making sure volunteers stay motivated, and improving

Behavior Change Communication (BCC) and better coordination with other sectors.

¶10. Comment: Overall, President Carter was very impressed with the huge success of the Guinea worm eradication program in Ghana. The Partners collectively agreed that there is a strong-shared vision and commitment to eradicate the disease and that coordination and vigilance are essential to the success of Ghana's final push towards complete guinea worm eradication. End Comment.

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